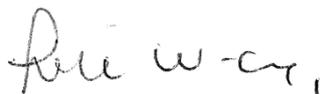


Date of issue: Friday 3rd September 2021

MEETING:	PEOPLE SCRUTINY PANEL Councillor Qaseem (Chair) Councillor Kelly (Vice-Chair) Councillor Ajaib Councillor Basra Councillor Begum Councillor Brooker Councillor Matloob Councillor Mohammad Councillor Sandhu
DATE AND TIME:	MONDAY, 13TH SEPTEMBER, 2021 AT 6.30 PM
VENUE:	COUNCIL CHAMBER, OBSERVATORY HOUSE, 25 WINDSOR ROAD, SL1 2EL
DEMOCRATIC SERVICES OFFICER: (for all enquiries)	NADIA WILLIAMS 07749 709961

NOTICE OF MEETING

You are requested to attend the above Meeting at the time and date indicated to deal with the business set out in the following agenda.



JOSIE WRAGG
Chief Executive

AGENDA

PART 1

<u>AGENDA ITEM</u>	<u>REPORT TITLE</u>	<u>PAGE</u>	<u>WARD</u>
	Apologies for absence.		
	<u>CONSTITUTIONAL MATTERS</u>		
1.	Declarations of Interest <i>All Members who believe they have a Disclosable Pecuniary or other Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Section 9 and Appendix B of the Councillors' Code of Conduct, leave the meeting while the matter is discussed.</i>		
2.	Minutes of the Health Scrutiny Panel and Education & Children's Services Panel meetings held on 31st March & 12th April 2021	1 - 6	-
3.	Appointment of Non-voting Co-opted Members of the Panel		-
	<u>SCRUTINY ISSUES</u>		
4.	Member Questions <i>(An opportunity for Panel Members to ask questions of the relevant Directorate/Assistant Director, relating to pertinent, topical issues affecting their Directorate – maximum of 10 minutes allocated)</i>		
5.	Provider Services Review	To follow	-
6.	Petition	7 - 10	-
7.	Health and Care Plan	11 - 40	-
8.	Adult Social Care Local Account 2019-20	41 - 50	-
9.	Forward Work Programme	51 - 54	-

Press and Public

Attendance and accessibility: You are welcome to attend this meeting which is open to the press and public, as an observer. You will however be asked to leave before any items in the Part II agenda are considered. For those hard of hearing an Induction Loop System is available in the Council Chamber.

Webcasting and recording: The public part of the meeting will be filmed by the Council for live and/or subsequent broadcast on the Council's website. The footage will remain on our website for 12 months. A

copy of the recording will also be retained in accordance with the Council's data retention policy. By entering the meeting room and using the public seating area, you are consenting to being filmed and to the possible use of those images and sound recordings.

In addition, the law allows members of the public to take photographs, film, audio-record or tweet the proceedings at public meetings. Anyone proposing to do so is requested to advise the Democratic Services Officer before the start of the meeting. Filming or recording must be overt and persons filming should not move around the meeting room whilst filming nor should they obstruct proceedings or the public from viewing the meeting. The use of flash photography, additional lighting or any non-hand held devices, including tripods, will not be allowed unless this has been discussed with the Democratic Services Officer.

Emergency procedures: The fire alarm is a continuous siren. If the alarm sounds Immediately vacate the premises by the nearest available exit at either the front or rear of the Chamber and proceed to the assembly point: The pavement of the service road outside of Westminster House, 31 Windsor Road.

Covid-19: To accommodate social distancing there is significantly restricted capacity of the Council Chamber and places for the public are very limited. We would encourage those wishing to observe the meeting to view the live stream. Any members of the public who do wish to attend in person should be encouraged.

This page is intentionally left blank

Health Scrutiny Panel – Meeting held on Wednesday, 31st March, 2021.

Present:- Councillors Sandhu (Chair), Smith (Vice-Chair), Ali, Begum and Mohammad

Also present:- Councillor Dhaliwal

Apologies for Absence:- Councillor Rasib

PART I

53. Declarations of Interest

Councillor Mohammad declared that she was a Practice Manager at a GP Surgery in Slough. She remained present for the duration of the meeting.

54. Minutes of the Last Meeting held on 14th January 2021

Resolved - That the minutes of the meeting held on 14th January 2021 be approved as a correct record.

55. Member Questions

None received.

56. Situation Report - Verbal Update on Covid-19 Situation in Slough

The Service Lead Public Health gave a presentation to the Panel, providing an overview of the current situation of the Covid-19 pandemic in Slough.

The Panel noted the following:

- The rate of cases had been fluctuating and the number of daily positive cases in Slough remained above the South East average, with a positivity rate of 2.8%.
- Slough's national ranking remained low at 68. Case rates were slightly higher in comparison to neighbouring local authorities.
- Vaccinations were being rolled out at the JMJC mosque and 50 vaccinations had been given on the first day. Appointments were available every Wednesday between 10.00am-6.00pm.
- Negotiations were ongoing for a mobile vaccination site.
- Research had been commissioned with Royal Holloway to provide insight into vaccine concerns in the borough. Further research would be carried out into vaccine take up among Eastern European residents

Panel Members made a number of comments which included clarification regarding the process for registering results of tests. It was explained that

Health Scrutiny Panel - 31.03.21

for lateral flow tests, there was an app to register the results of home testing. National Covid data was then collected via the app. For community testing, results would be logged by staff at the site.

In response to what steps had been taken to reach out to communities who had reservations about getting the vaccination, it was noted that officers were looking into liaising with community groups such as the Polish Club. Nationally, the Afro-Caribbean community fallen behind in terms of vaccination take-up and research conducted by Royal Holloway had highlighted people's concerns regarding the safety of the vaccine, its make up, the speed of development of the vaccine and the requirement to provide personal information to have the vaccine. These concerns and how to best to address them was being looked into.

A Member asked whether Slough's population profile was a cause for additional concern, given that Slough had a large number of young people many of whom were not yet vaccinated. The importance of following Covid restrictions and safety measures should continue to be emphasised to younger people. It had been suggested that the death rate following discharge from hospital was high and the Panel were informed that there was no data available regarding the death rate following hospital discharges. The Service Lead, Public Health undertook to provide any such data to Members once it became available.

Referring specifically to the new variant, a Member asked whether there was any data to show that the transmission rates had increased following the re-opening of schools. Infection rates at schools were being monitored and daily updates of cases provided. Pupils, staff and families were being encouraged to carry out home testing.

It was agreed that data on the total number of vaccinations given in Slough would be circulated to the Panel.

At the conclusion of the discussion the status report was noted.

Resolved: That the update report be noted.

57. Safeguarding Partnership Annual Report 2019/20

The Panel received details of the Safeguarding Partnership Annual Report 2019/2020 which were presented by David Peplow, the Independent Scrutineer for the Safeguarding Partnership.

An overview of the report and context about process was outlined, which included statutory changes to reporting and structural changes to how Slough's Safeguarding Partnership was operating; noting that strategic leadership had strengthened and changed whilst duties to safeguard and promote the welfare of children and adults had remained and consistently delivered.

Health Scrutiny Panel - 31.03.21

Overall, the report showed that for the 2019/2020 period the Partnership had been stable, was working well and had adapted well to remote working. However, it was difficult to evaluate from the data alone what real difference the work of the Partnership had made to the experiences of a young person or a vulnerable adult. Future reports would seek to better articulate what difference the Partnership made to those experiencing violence, exploitation or self-neglect.

All data shared with the Partnership was closely scrutinised through the usual rigorous internal governance processes of each of the agencies. There were some areas of statutory reporting, and of particular note was the impact of training. Case reviews for both Adults and Children had been challenging due to significant process changes. The tables listed a number of positive results for 2019/2020 period. Data for the 2020/2021 period was currently being collated. The headline findings and statements had been based on the Six Steps to Scrutiny developed by the University of Bedford.

The Panel discussed a range of issues and in particular noted that previously, Children's Services had been criticised for its lack of support to those transitioning from care. It was explained that there were significant differences in the statutory provisions applicable to children and adults. However, Slough was working with a range of agencies to embed good practice and preventative work was being undertaken to ensure the best possible outcomes for service users.

The Executive Director People (Adults) stated that the team had wanted to focus on Slough and provide a broader view. The criteria of provision of services for adults was narrower than that for children and this was due to funding available and the provisions of the Care Act. This was a challenge faced by many local authorities. The Social Care Transformation Programme included a work stream 'preparing for adulthood' aimed at improving the transition of young people between Children and Adult Services.

A Member asked for details regarding the rise in incidences relating to modern slavery and self-neglect. The Panel was informed that greater public awareness, understanding and reporting of such matters, including self referrals, had contributed to an upward trend.

A Member sought clarification as to what the independent Scrutineer hoped to achieve at Slough. The independent Scrutineer stated that his main role was to evaluate the current arrangements within the Partnership. In his view, the main area of deficit was assessing what difference the Partnership made to the experiences of vulnerable young people and adults with needs.

Councillor Dhaliwal, speaking under Rule 30, expressed concern at the increase in the incidences of modern slavery, self-neglect, financial and psychological abuse and whether the pandemic had contributed to the increase. The Executive Director People (Adults) advised that the data in the annual report was pre-Covid and related to the 2019/2020 financial year.

Health Scrutiny Panel - 31.03.21

However, as lockdown restrictions eased, the service expected to see an increase in the reporting of self-neglect.

Resolved - That details of the report be noted.

58. Adult Social Care Strategy and Budget

The Committee received a report the delivery of the adult social care strategy, the expected outturn for 2020/21, the proposed budget for adult social services in Slough in 2021/2022 and a summary of the new adult social care transformation programme.

The Panel received a presentation and the Executive Director People (Adults) highlighted the following points:

Adult Social Care Strategy: The past year had been one of increased challenge for adult social care – particularly the impact of the pandemic on those living in care homes. Staff in this area had demonstrated resilience, patience and determination to continue to support some of the most vulnerable people. Key achievements were summarised.

Financial Position of Adult Social Care (ASC) 2020/21: The budget for ASC 2020/21 was circa £40m. The forecast outturn was an approximately £3m overspend with the impact of the pandemic accounting for £2m of that overspend. Councils nationally were facing similar pressures and an announcement from central government was awaited with proposals for the sustainable future funding of ASC.

Adult Social Care Proposed Savings and Growth 2021/22: In recognition of the significant financial pressures on service delivery a new ASC Transformation Programme was being developed and areas of growth and savings had been agreed for 2021/22. A summary of the agreed growth areas and savings were outlined.

Adult Social Care Transformation Programme 2021/24: The key areas included:

- Communications and Engagement
- Practice development – including strength-based working, locality working, personalisation, joint funding arrangements with the NHS, a new agreement for integrated mental health services
- Market management – including development of a new shared lives scheme, day opportunities redesign, improvements in the purchasing of care, costs of care and developing a range of accommodation options to support people to live independently in the community.
- Preparation for adulthood – improving the outcomes for young people with social care needs as they move into adult services.
- Targeted interventions – deep dives into the reablement service and internal provider services.

Health Scrutiny Panel - 31.03.21

- Digital and IT - linked to the wider ambitions of the Council to be digital by default

It was noted that business cases were being developed to confirm the specific actions for each of the workstreams and confirmation of the savings levels that would be delivered over the coming years.

In the ensuing discussion Members asked a number of questions including whether the agreed savings were achievable. The Executive Director People (Adults) explained that achieving the savings would likely be extremely challenging, due to the uncertain position in relation ASC moving forward following the pandemic given concerns about the workforce who were stretched and expecting an increase in new areas of work and risks relating to sustainability and costs from service providers. The options proposed were reasonable, however, the final figure was subject to change and this had been highlighted as a risk in the budget.

A Member queried whether funding from Central Government been sufficient to allow the Council to fulfil its responsibilities. It was noted that additional funding provided as a result of the pandemic would not be given in future grants from the government but service demand would remain and therefore contingency funds had been earmarked.

Responding to whether family members could provide care and receive direct payment it was clarified that direct payment rules disallowed family members from receiving funds except in exceptional circumstances such as Covid. As the pandemic receded this would no longer be possible.

Resolved - That details of the report be noted.

59. Update on change in Children and Adolescent Mental Health Service

The Chair advised that the report was for information purposes only and would be further discussed at the forthcoming Education and Children's Services Scrutiny Panel.

Resolved - That the report be noted.

60. Members Attendance Record 2020/21

Resolved – That details of the Members' Attendance Record 2020/21 be noted.

61. Date of Next Meeting - 30th June 2021

The date of the next meeting was confirmed as 30th June 2021.

Chair

(Note: The Meeting opened at 6.30pm and closed at 7.55pm)

This page is intentionally left blank

SLOUGH BOROUGH COUNCIL

REPORT TO: People Scrutiny Panel **DATE:** 13 September 2021

CONTACT OFFICER: Nick Pontone
(For all enquiries) Democratic Services Lead
 (01753) 87120

WARD(S): All

PART I
FOR COMMENT & CONSIDERATION

PETITION – “ABANDON PLANNED CLOSURE OF DAY CENTRES”

1 **Purpose of Report**

To advise the People Scrutiny Panel of a Petition titled “Abandon Planned Closure of Day Centres” that has been received under the Council’s Petitions Scheme. The Petition contains 804 signatures, all of which were submitted online via the e-petition facility on the Council’s website.

2. **Recommendation**

The Panel is requested to resolve:

- a) That the petition be received and considered in scrutinising the Provider Services Review elsewhere on the agenda.
- b) That, following consideration of the petition, the Panel decides whether to refer any comments on the Provider Services Review to Cabinet, which will take decisions on this matter at the meeting on 20th September 2021.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

The Petitions Scheme is an important part of the governance arrangements of the Council which is a cross cutting issue supporting all Joint Wellbeing Strategy and Five Year Plan outcomes. The strategic implications relating to the specifics of this petition are set out in the Provider Services Review report.

4. **Other Implications**

(a) **Financial**

There are no direct financial implications arising from the recommendation in section 2 of this report. The financial implications of the Provider Services Review are set out in that report.

(b) **Risk Management**

In relation to the petition, there are reputational and governance risks if the petition is not processed in accordance with the Council’s Petitions Scheme, set out in Article 17

of the Constitution. The risks relating to the specifics of this petition are set out in the Provider Services Review report.

(c) Human Rights Act and Other Legal Implications

There are no Human Rights Act Implications associated with the recommendations of this report.

This report complies with the SBC Constitutional requirement that a petition received with between 750 and 1,499 signatures be considered by the Overview & Scrutiny Committee.

(d) Equalities Impact Assessment

There is no identified need for an Equalities Impact Assessment in the issues directly related to the petition.

5. **Supporting Information**

5.1 Under the Council's published Petitions Scheme a Petition that contains between 750 and 1,499 signatures is discussed in a public meeting of the Council as part of the overview and scrutiny process. In this case the appropriate body is the People Scrutiny Panel which is reviewing the proposals of the Provider Services Review that directly relates to this petition.

5.2 The following e-petition was live on the Council website from 22nd July 2021 to 19th August 2021. The petition received 804 online signatures during this period. The specific wording of the petition was as follows:

“Abandon planned closure of day centres”

“We the undersigned petition the council to abandon the plans of closing down the day centres and short break service for people with learning disability and/or autism.

The day service and short break service centres are vital for people with learning disabilities and autism. They provide social interactions, fun, learning, SAFETY and STABILITY in a way which cannot be replaced by the alternative arrangements the council proposes.

There is no other adequate place in Slough for people with learning disabilities and autism.

The parents and carers of service users care for the disadvantaged people with disabilities often for their entire life. Closing down the reliable day care offered by the day centres and replacing it with often inadequate alternatives will simply create massive problems for people who are already on the edge of mental breakdown following the long period of closure due to Covid.

The people with learning disabilities/autism are some of the most vulnerable members of the community. They and their parents/carers need help. Please sign this petition to request the council to abandon the closure plans and to reopen the day centres and the short break service. We request that

the council restores the service to the level offered before the Covid related closures.”

Petitions Scheme

- 5.3 By virtue of the fact that there were 804 signatories the petition must be considered by overview and scrutiny, in this case the Place Scrutiny Panel. The Petition Organiser has been invited to the meeting to speak on the Petition.
- 5.4 The Panel can take the issues raised in the petition into account in its scrutiny of the Provider Services Review and make any comments to Cabinet which will take decisions in relation to the review at its meeting on 20th September 2021.
- 5.5 The Petitions Scheme indicates that the Council's response to a Petition will depend on what a petition asks for and how many people have signed it but may include one or more of the following;
- Taking the action requested in the Petition
 - considering the Petition at a Council Meeting
 - Holding an Inquiry
 - Commissioning relevant research
 - Organising a public meeting
 - Mounting a wider public consultation
 - Meeting with the Petition Organiser or representatives of signatories
 - Providing a written response outlining the Council's views on the subject
 - Referring the issue to the Council's Overview & Scrutiny Committee **OR**
 - Referring the issue to the relevant Committee/Cabinet
 - Consulting statutory partners and local service providers
 - Instigating discussions with the voluntary and community sectors
 - Making representations to Commercial or other Interests
- 5.6 However, in this case, the action the Panel can take is clear in that the Panel is able refer any comments on the Provider Services Review to Cabinet on 20th September 2021. The Cabinet decision will in effect be the formal response to the petition and will be informed by scrutiny process.

6. **Conclusion**

Members are requested to consider what action to take with regard to the petition.

7. **Appendices Attached**

None.

8. **Background Papers**

Petition

This page is intentionally left blank

SLOUGH BOROUGH COUNCIL

REPORT TO: People Scrutiny Panel

DATE: 13th September 2021

CONTACT OFFICER: Alan Sinclair, Executive Director People (Adults)
Tracey Faraday-Drake, Executive Place Managing Director (Slough)

(For all Enquiries) (01753) 875752

WARDS: All

PART I
FOR COMMENT AND CONSIDERATION

SLOUGH HEALTH AND CARE PLAN

1. **Purpose of Report**

To provide the People Scrutiny Panel with the opportunity to scrutinise:

- The draft Health and Care Plan for Slough
- The proposed changes to the running of the Health and Social Care Partnership Board, in order to improve Integration and help deliver this plan.

2. **Recommendations/Proposed Action**

That the Panel review:

- The draft Health and Care Plan for Slough
- The proposed changes to the running of the Health and Social Care Partnership Board

and provide comments and suggestions as necessary.

3. **The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan**

3.1 The Health and Social Care Partnership Board is a sub-group of the Slough Wellbeing Board. The Slough Wellbeing Board and its sub-groups aim to address the four priority areas outlined in the Slough Wellbeing Strategy 2020-2025:

- Starting Well
- Integration
- Strong, healthy and attractive neighbourhoods
- Workplace Health

3.2 In particular, the work of the Health and Social Care Partnership Board aims to address Priority Two: Integration.

- 3.3 The priorities in the Wellbeing Strategy are informed by evidence of need contained in the Joint Strategic Needs Assessment. Therefore, the work led by the Health and Social Care Partnership Board to deliver Priority Two is built upon the evidence outlined in the JSNA.
- 3.4 The work of the Slough Wellbeing Board also contributes to the five priority outcomes in the Council's Five Year Plan:
- Outcome 1: Slough children will grow up to be happy, healthy and successful.
 - Outcome 2: Our people will be healthier and manage their own care needs.
 - Outcome 3: Slough will be an attractive place where people choose to live, work and stay.
 - Outcome 4: Our residents will live in good quality homes.
 - Outcome 5: Slough will attract, retain and grow businesses and investment to provide opportunities for our residents.
- 3.4 In particular, the work of the Health and Social Care Partnership Board aims to address Priority One and Priority Two.

4. **Other Implications**

(a) **Financial**

There are no financial implications of proposed action.

(b) **Risk Management**

There are no risk management implications of proposed action.

(c) **Human Rights Act and other Legal Implications**

There are no Human Rights Act implications arising from this report.

(d) **Equalities Impact Assessment**

There are no equalities implications arising from this report. However, it is worth noting that the draft Health and Care Plan centres around the aim of 'reducing health inequalities by promoting and developing independence through integration'. As such, the plan aims to reduce health inequalities in Slough, and will support projects which focus on the topic of health inequalities in the town.

5. **Supporting Information**

- 5.1 The Health and Social Care Partnership Board (HSCP) was set up to provide oversight, strategic direction and co-ordinate commissioning intentions for the integration of health and social care services within Slough.

- 5.2 When the Slough Wellbeing Strategy was refreshed in summer 2020, the HSCPb was tasked with delivering the second priority of the strategy – Integration.
- 5.3 The HSCPb has been working to develop a Health and Care Plan. This plan seeks to provide the detail of how the HSCPb board and the partner organisations which sit on the board can deliver greater integration between health and social care in Slough. This plan will steer the work of the HSCPb, and its member organisations, to deliver Priority Two: Integration, of the Slough Wellbeing Strategy.
- 5.4 This work is being supported by GateOne, the transformation consultancy firm currently employed to lead the OurFutures Transformation programme at Slough Borough Council.
- 5.5 The plan is focused on integration and partnership working across health and social care in Slough. The plan focuses on the following priority areas:
- Better access to care
 - Improved outcomes for mental health
 - Responding to changing demands and needs post COVID-19
 - More Integrated and Pre-emptive service offers
 - Improved outcomes for frailty
 - Use of locality based models
- 5.6 A draft version of this plan can be found in Appendix A.
- 5.7 Many of these priority areas involve working closely with members of the Slough Place Based Committee, run by the Frimley Collaborative CCG. A substantial number of reports are delivered to both the Slough Place Based Committee and the HSCPb. In order to reduce duplication, improve efficiencies and increase partnership working, the HSCPb and the Slough Place Based Committee are currently exploring how they could work more closely together.
- 5.8 It is proposed that the Health and Social Care Partnership Board and the Slough Place Based Committee will work collaboratively by conducting their meetings at the same time. This will allow the two groups to transact their business together, while still remaining two separate boards. The HSCPb will retain their own terms of reference and membership, but be able to work more effectively with colleagues from the Slough Place Based Committee.
- 5.9 The Terms of Reference of the HSCPb have been updated in line with these proposed changes. A draft version of the proposed Terms of Reference of the HSCPb can be found in Appendix B.
- 5.10 The draft Health and Care Plan, and the proposed changes to the running of the HSCPb, were presented to the Slough Wellbeing Board at their July meeting. The Board approved both the current draft of the plan, and the proposals for the changes to the HSCPb.

6. **Conclusion**

This report provides the People Scrutiny Panel with the opportunity to scrutinise both the draft Health and Care Plan for Slough, and the proposed changes to the running of the Health and Social Care Partnership Board, in order to improve integration and help deliver this plan.

The panel is requested to review both items and provide comments and suggestions as necessary.

7. **Appendices Attached**

A – Draft Health and Care Plan.

B – Draft Terms of Reference of the HSCP.B.

8. **Background Papers**

None.



SLOUGH HEALTH AND CARE PLAN

Reducing health inequalities by promoting and developing independence through integration

The Slough Health and Care Plan is a key part of our Vision for Slough. Its aim is to bring together our work at Place which focusses on the integration of health and social care for the benefit of our neighbourhoods and citizens.

One Plan
Many partners

One Goal – To improve the Health and Wellbeing of the People of Slough through Working together.

SLOUGH2040

The Slough 2040 Vision outlines our ambitions for the future of Slough.

This vision has been created by engaging with the local people of Slough - our residents, elected councillors, and the organisations that serve the people of the town. By listening to their voices, we have created a bold and ambitious shared vision of Slough's future. Over the next 20 years, we will work in partnership with the residents, public bodies, charities and businesses of Slough to transform this vision into reality.

The Slough 2040 vision outlines the shared ambitions of organisations working in partnership in this town, including:



SLOUGH2040



Slough will have a vibrant town centre, brimming with diverse and exciting culture

By 2040, Slough's town centre will be a destination of choice - a place where people come from afar to enjoy the vibrancy and diversity of the local culture. The town centre will be an attractive and modern space, which is fully accessible to all. It will blend together retail, leisure, business and housing to create a space that is exciting, busy and thriving throughout the day. Culture will be at the heart of the town, with world-class performance spaces, street art and a museum woven into the built environment.

Town square lined with cafes and restaurants. Co-working spaces. Rooftop gardens. Amphitheatre. Museum celebrating local culture. Busking and street entertainment. An accessible built environment.



Slough will have a strong, globally renowned economy, which supports its people to prosper and live well

In the future, Slough will have a global reputation as a place to do business. Slough's economy will be thriving and diverse, home to a mix of businesses and different employment types. Businesses will feel connected to the wider town, and employers in Slough will be integral to high-quality education and training schemes. Local people will be employed in good jobs - jobs that offer them fulfilment, fair wages and support their wellbeing. Poverty will be alleviated, and everyone in Slough will have the opportunity to flourish and live well.

Slough is known for its reputation for business. Small businesses and start-ups supported. Employers encouraged to support flexible working for carers. Training courses aligned with the needs of employers.



Slough will have attractive, green neighbourhoods, which bring people together

In the future, Slough will have high-quality housing and accommodation which meets the needs of our local population. Different types of housing will exist together, with affordable housing, family housing and social care accommodation built alongside one another to create diverse neighbourhoods. All our residents will have access to attractive green spaces, including parks, allotments and children's play facilities. The neighbourhoods of Slough will feel clean, well-maintained and welcoming.

Street trees. Colourful buildings. Homes with space to work from home. Community gardens and allotments. Green gyms and skate parks. Community litter picking events.



Slough will be a place of lifelong learning and aspiration for all

Slough schools and colleges will provide a high-quality and inclusive education, which encourages aspiration in our young people, and prepares them for their adult lives. Students will be able to choose between vocational and academic pathways, with technical training centres sitting alongside a world-class university presence in the town centre. Education will continue into adulthood, with training facilities offering people of all ages the chance to up-skill, retrain or receive careers advice.

Life skill lessons in schools, that cover topics such as career advice, financial skills and relationship education. Volunteer tutors to level-up disadvantaged young people. Adult training centre with childcare and a café on site.



Slough will be a globally connected town, with a transport system which prioritises public and active transport

The Slough of the future will be an internationally connected town, with strong transport links to Heathrow, London and other major cities. Locally, Slough will have a world-class public transport system which meets the needs of our residents by being well-connected, reliable and affordable. Cycling and walking infrastructure will be improved, with safe cycling and walking routes embedded throughout the town. There will be fewer cars in Slough, and the cars that remain will largely be low-emission vehicles.

Car-free town centre. World-class public transport system. Rail link to Heathrow. Park and Ride system. A Slough payment card for all public transport. Car-free cycle paths. A town centre bike hub. Rickshaw hire for journeys within the borough.



Slough will be a healthy town, where people are supported to live empowered lives

The people of Slough will be encouraged to live healthy and active lives. Slough will have a wide range of excellent leisure facilities, including gyms, pools, and an ice rink. There will be high-quality and timely healthcare for those who need it, provided through GP surgeries, mental health services and other settings embedded in the local community. Health and social care will be integrated, and social care services in Slough will be innovative and inspiring as they support people to live empowered and independent lives.

Holistic wellbeing hub. Wellbeing. Healthier eating options in the town centre. Outdoor swimming pool. Inclusive sport leagues. More sheltered accommodation and extra-care housing. Positive billboards.



Slough will be a carbon-neutral and sustainable town

By 2040, the town of Slough will be entirely carbon-neutral. Pioneering renewable power and energy efficiency technology will be incorporated throughout the built environment. Trees will grow across the town - both in green spaces and woven into our streetscapes. Biodiversity will be encouraged through the use of sensitive planting schemes and the creation of wildlife havens. Sustainable lifestyles will be promoted, and recycling facilities will be world-class.

Solar panels on rooftops. Buildings designed to be water efficient. Green walls and rooftops. Bee-friendly planting scheme. Wildlife corridors and road crossings. Grass verges allowed to re-wild. Increased kerbside recycling.



Slough will have a strong, diverse community where differences are celebrated, and everyone feels safe

In 2040, Slough will be known for its cohesive and inclusive community. Different cultures and identities will live together with tolerance and respect. Crime rates will be low, and people will feel safe and welcome in their local neighbourhoods. Communities will be involved in local decision-making, and will be empowered to manage their own needs and take ownership of their local area. There will be facilities for local community groups, and the town will have a prominent central youth centre which provides an exciting space for the young people of Slough.

Funding and affordable facilities for community groups. Service to match people to voluntary opportunities. Carnival celebrating diversity. Equality events such as Black History month recognised and marked.

● These inspired ideas are all suggestions that come from our residents. These are not definite policy commitments, but instead are intended to give a taste of what the people of Slough would like to see in their town in the future.

The 2040 vision for Slough identifies 8 priorities, of which health is one.

The Slough Health and Care plan supports this vision for Slough to be a **healthy town where people are supported to live empowered lives.**

SLOUGH HEALTH AND CARE PLAN



REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

Page 18



The Kings Fund has recently published a significant piece of research on Place Based Working and their key findings are set out in the 8 priorities below

- start from purpose with a shared local vision
- build a new relationship with communities
- invest in building multi agency partnership
- build up from what already exists locally
- focus on relationships between system places and neighbourhoods
- nurture joined up resource management strengthen the role of providers at place
- embed effective place-based leadership

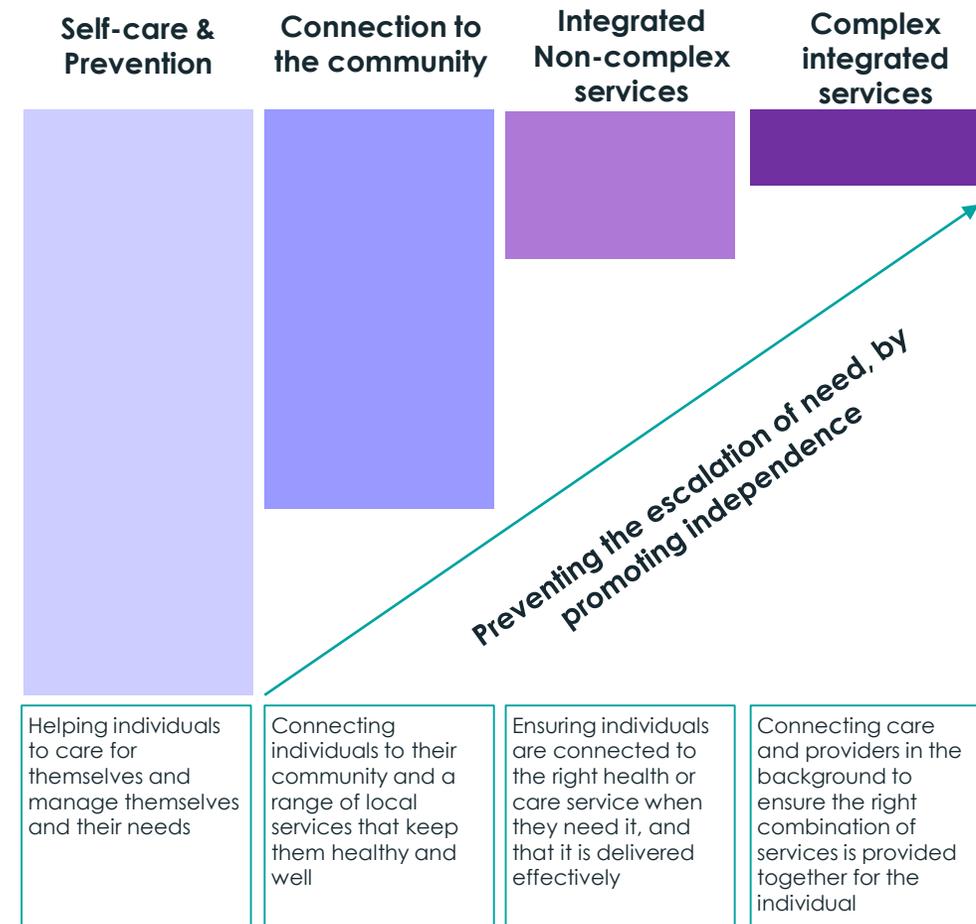
The Slough Health and Care Plan supports our journey to Work in an integrated way, as individual organisations working Together for the benefit of our communities.

SLOUGH HEALTH AND CARE PLAN



REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

- Slough's health and care partners are collectively aiming to promote good health and care outcomes and reduce inequality in these outcomes for the residents of Slough.
- The collective plan is to **develop, promote and maintain independence**, because this is good for health, good for people, and good for the taxpayer and sustainability of services.
- This approach is achieved through:
 - ✓ **Prevention and promoting self-care** through information and advice
 - ✓ **Connecting individuals to their communities** to reduce the need to present in institutional settings
 - ✓ When support is needed, **delivering care in a seamless and integrated way**



SLOUGH HEALTH AND CARE PLAN



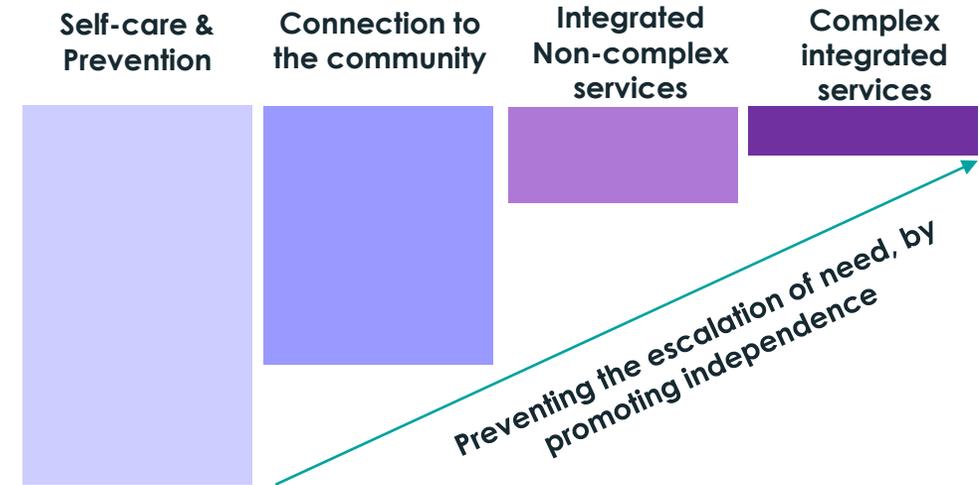
REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

- The approach applies across all stages of the lifecycle, and aligns to the ICS' three core pillars of **starting well, living well** and **ageing well**.
- For each segment, the aim is to build individuals' capacity to care for themselves without escalating into institutional settings.

Page 20

This can only be achieved by the Slough Partnership Board member organisations **working together in an integrated way**. This applies both to meeting complex needs with multiple services but also in the messages and interactions individual organisations have, that need to develop, promote and maintain independence.

- This plan identifies the cross-cutting, priorities that within partners' individual delivery plans, and reflect where partners are working together to support the delivery



Starting well



Living well



Ageing well



Slough Health and Care Partnership Board members



SLOUGH HEALTH AND CARE PLAN

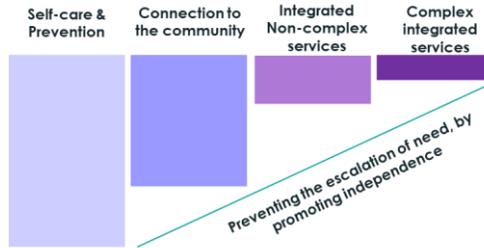


REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

The Slough integrated health and care plan...

...delivers the needs of service users, as per the ADASS Think Local Act Personal model

Page 21



Living the life I want, keeping safe and well: wellbeing and independence

I stay in control: when things need to change

Keeping my family, friends and connections: active and supportive communities

I feel support by the people and workforce who support me

Having the information I need, when I need it - information and advice

My support, my own way: flexible and integrated care and support



...and supports the Frimley Health and Care ambitions...

...which support the NHS Long Term Plan



Our Ambitions	How our Ambitions support delivery of the NHS Long Term Plan themes
1. Starting Well	Our Starting Well ambition will enable us to deliver the LTP ambition for a strong start in life for children and young people
2. Focus on Wellbeing	The Focus on Wellbeing ambition demonstrates our collective commitment to taking more action on prevention and health inequalities
3. Community deals	Our Community Deal ambition is at the heart of our new strategy and provides a clear focus on population health. It will enable us to work with our communities to design and deliver not just our health and care services, but also education, employment, housing and transport. This will be our way of delivering personalised care, building new relationships and shifting the power in decision making. Our way of co-producing and strengthening communities will also deliver the further integration of local health and care services
4. Our People	Our People ambition is how we will ensure that staff get the backing they need and deliver the interim people plan. We are all committed to improving our staff experience at work, increasing their career opportunities and retention and recruiting more people from our local population
5. Leadership and cultures	The Leadership, Culture and Improvement ambition will increase the scale of change and improvement that we deliver
6. Outstanding use of resources	Through our Outstanding Use of Resources we will continue our collective focus on the 'Frimley pound' to make sure that taxpayers' investment is used to maximum effect. Our long term commitment to reducing need and inequalities will support the long term sustainability of health and care services. We have made digitally-enabled care an early priority for this ambition

SLOUGH HEALTH AND CARE PLAN

REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION



WHAT HAS BEEN ACHIEVED TO DATE

- Lots of work has been done to date to build integrated approaches to delivering care. This includes:
 - ✓ Establishing community maternity hubs
 - ✓ Establishing Mental Health Integrated Community Service (MHICS)
 - ✓ Establishing the recovery college
 - ✓ Providing some GP direct referrals for Long Term Conditions
 - ✓ Establishing Locality Access Points for integrated multi-disciplinary decision-making, and supporting these through Connected Care
 - ✓ Implementing Home First to improve recovery out of a hospital setting
- This work has focused more on the lower volume, high needs groups.
- Covid-19 has further developed partnership working around shared priorities.
- The strategy for Slough is to build on these to ensure a larger number of people can benefit across Slough, and to ensure the focus is on the right care needs coming out of Covid-19

SLOUGH HEALTH AND CARE PLAN

REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION



THE CHANGES WE ARE SEEKING TO MAKE

Integrated plan changes

- Better access to care
- More integrated and pre-emptive service offers
- Use of locality-based models
- Improved outcomes for Mental Health
- Improved outcomes for frailty
- Responding to changing demand and needs post Covid-19

Outcomes this supports

- ✓ Reduce health inequalities
- ✓ Prolonged independence and changed behaviours
- ✓ Reduced admissions / readmissions and lengths of stay
- ✓ Reduced avoidable demand for scarce health & care resources

Benefit for Slough

Improved Health and Wellbeing outcomes for the people of Slough

SLOUGH HEALTH AND CARE PLAN

REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

THE CHANGES WE ARE SEEKING TO MAKE



Better access to care

- ✓ Improve **ethnic minority maternity access**
- ✓ Expand and deliver at scale **same day access in primary care**
- ✓ Expand and integrate **social prescribing and care coordinators**
- ✓ Increased **cancer screening**
- ✓ Expand **GP Direct referrals** for LTCs with **In-Reach team**
- ✓ **Telehealth** for Diabetes, LTCs, disability and dementia
- ✓ Introduce **same day emergency care** (SDEC) across a range of urgent care
- ✓ Ensuring we have a **viable, sustainable and affordable care market**
- ✓ Increasing our use of **digital and technology** to support people live independently



Improved outcomes for Mental Health

- ✓ Expand **MHICS** across all 4 PCNs
- ✓ **Increasing physical health checks** / improving physical health outcomes for people with serious mental illness (SMI) and LD
- ✓ **111 first** for Mental Health
- ✓ Reintroduce **Healthmakers** as part of IAPT
- ✓ **Integrated community MH** for older patients



Responding to changing demand and needs post Covid-19

- ✓ Production of a Slough COVID Community Impact Assessment)
- ✓ Respond to post-pandemic workforce pressures and implement 7 day working



More integrated and pre-emptive service offers

- ✓ Improve **transition management**, including **preparing for adulthood**
- ✓ Improving **strength-based** and personalised ways of working in social care
- ✓ Engagement with communities to better understand challenges to **healthy childhood weight**
- ✓ Primary, secondary and tertiary **prevention of obesity**
- ✓ Promote **workplace health** (partnerships with employers, workplace health awards, information, advice, resources, and cultural change)
- ✓ **Expand CVS role in care** (eg bariatric care and maternal / perinatal care, suicide prevention)
- ✓ Use **innovation fund** to expand CVS support to CYP
- ✓ Expand and integrate **social prescribing and care coordinators**
- ✓ Roll out **Healthier Together Platform** with Paediatric focus
- ✓ Implement **healthy homes** as part of DFG task and finish group
- ✓ Review **reablement services** including intermediate care, rehab and therapeutic short term services
- ✓ **Consolidate Home First** and D2A scheme



Improved outcomes for frailty

- ✓ Develop **LAP and expand MDT clusters** to proactively review frailty cohorts
- ✓ Expand **GP Direct referrals for Frailty**



Use of locality-based models

- ✓ Implement **locality hubs** with CVS as a key partner in service delivery
- ✓ Expand **community maternity hubs**

SLOUGH HEALTH AND CARE PLAN

REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

THE CURRENT ACTIVITIES TO SUPPORT THESE CHANGES

	Slough CVS	Public Health	SBC	Frimley CCG	PCNs	BHFT	FHFT
BETTER ACCESS TO CARE							
✓ Improve ethnic minority maternity access	✓	✓		✓		✓	✓
✓ Expand and deliver at scale same day access in primary care				✓	✓		
✓ Expand and integrate social prescribing and care coordinators	✓	✓		✓	✓		
✓ Increased cancer screening		✓		✓			
✓ Expand GP Direct referrals for LTCs with In-Reach team				✓	✓	✓	✓
✓ Telehealth for Diabetes, LTCs, disability and dementia			✓	✓		✓	
✓ Introduce same day emergency care (SDEC) across a range of urgent care				✓			✓
✓ Ensuring we have a viable, sustainable and affordable care market			✓	✓			
✓ Increasing our use of digital and technology to support people live independently			✓	✓	✓	✓	
MORE INTEGRATED AND PRE-EMPTIVE SERVICE OFFERS							
✓ Improve transition management including preparing for adulthood			✓				
✓ Improving strength-based and personalised ways of working in social care	✓		✓				
✓ Engagement with communities to better understand challenges to healthy childhood weight	✓	✓	✓	✓	✓		
✓ Primary, secondary and tertiary prevention of obesity	✓	✓	✓	✓	✓	✓	✓
✓ Promote workplace health (partnerships with employers, workplace health awards, information, advice, resources, and cultural change)	✓	✓		✓			
✓ Expand CVS role in care (eg bariatric care and maternal / perinatal care, suicide prevention)	✓	✓		✓	✓	✓	
✓ Use innovation fund to expand CVS support to CYP	✓		✓				
✓ Expand and integrate social prescribing and care coordinators	✓	✓		✓	✓		
✓ Roll out Healthier Together Platform with Paediatric focus				✓	✓	✓	✓
✓ Implement healthy homes as part of DFG task and finish group		✓	✓	✓			
✓ Review reablement services including intermediate care, rehab and therapeutic short term services		✓	✓	✓		✓	
✓ Consolidate Home First and D2A scheme				✓		✓	✓
IMPROVED OUTCOMES FOR MENTAL HEALTH							
✓ Expand MHICS across all 4 PCNs			✓	✓	✓	✓	
✓ Increasing physical health checks / improving physical health outcomes for people with SMI and LD			✓	✓	✓	✓	✓
✓ 111 first for Mental Health				✓	✓	✓	
✓ Reintroduce Healthmakers as part of IAPT	✓					✓	✓
✓ Integrated community MH for older patients			✓	✓		✓	
IMPROVED OUTCOMES FOR FRAILTY							
✓ Develop LAP and expand MDT clusters to proactively review frailty cohorts			✓	✓		✓	✓
✓ Expand GP Direct referrals for Frailty			✓	✓	✓	✓	✓
USE OF LOCALITY-BASED MODELS							
✓ Implement locality hubs with CVS as a key partner in service delivery	✓	✓	✓	✓	✓	✓	
✓ Expand community maternity hubs	✓	✓		✓		✓	
RESPONDING CHANGING DEMANDS AND NEEDS POST-COVID							
✓ Production of a Slough COVID Community Impact Assessment)		✓	✓	✓	✓		
✓ Respond to post-pandemic workforce pressures and implement 7 day working			✓	✓	✓	✓	✓

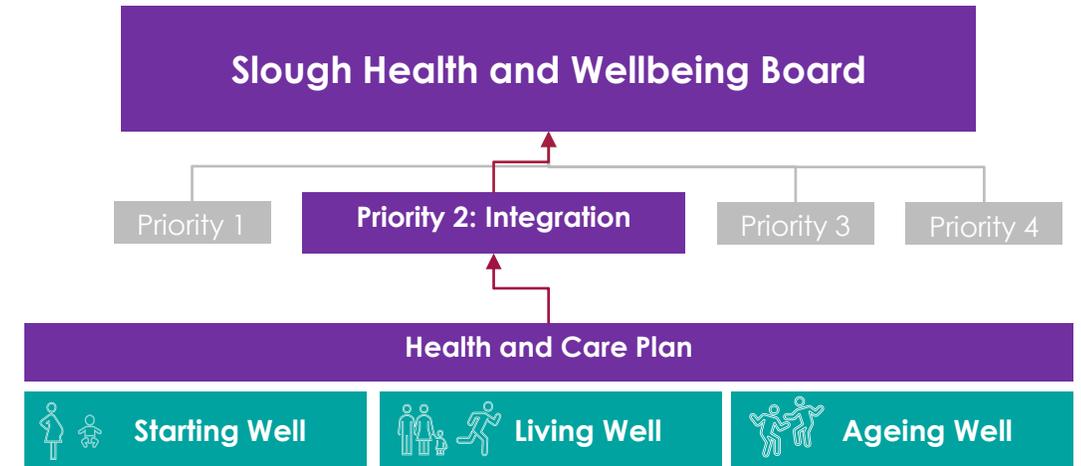
SLOUGH HEALTH AND CARE PLAN



REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

How these priorities will be governed

- All Partner organisations have been working together through the Slough Partnership Board, reporting to the Health and Wellbeing Board to develop an integrated set of priorities for health and care in Slough as part of the “integration” priority
- This is built around the core pillars of **starting well**, **living well** and **ageing well** as well as some core work that enables integration structurally
- The health and care plan will reflect those activities that are planned across the partner organisations to drive the biggest impact on integrated health and care for Slough’s population:
 - It will coordinate exist work across organisations to better manage inter-dependencies
 - It will not create a whole new set of priorities, but build on the work being planned and undertaken
 - It will help all partners to work together on having the biggest impact in reducing health inequalities



Slough Health and Care Partnership Board members



SLOUGH HEALTH AND CARE PLAN



REDUCING HEALTH INEQUALITIES BY PROMOTING AND DEVELOPING INDEPENDENCE THROUGH INTEGRATION

Our shared principles to inform collective working and integration in 2021/2 and beyond

FUNDING

Seek opportunities to expand pooled funding beyond the current BCF commitments. For example:

- Use BCF pool to expand integrated mental health services / budget
- Expand D2A funding through BCF contributions

CO-PRODUCTION

Co-production and co-design with people who use services and their family carers as core principle of how we will do all commissioning work

BUILD ON EXISTING MODELS

Where possible build on and utilise existing infrastructure, plans and proven approaches that are working

POPULATION HEALTH

We will take a population health approach to Slough's health and care needs, using data effectively to shape our responses

JOINT GOVERNANCE

We will work jointly to oversee and deliver this plan through the Health and Social Care Partnership Board and the Health and Wellbeing Board.

This page is intentionally left blank

Health & Social Care Partnership Board

Terms of Reference

1. Purpose

The purpose of the Health and Social Care Partnership Board is to provide oversight and strategic direction for the integration of health and social care services within Slough.

The Health and Social Care Partnership Board reports to the Slough Wellbeing Board and takes responsibility for delivering priorities of the Wellbeing Strategy that are related to the Integration of Health and Care for the benefit of Slough residents. The Health and Social Care Partnership Board also works closely with the Frimley CCG, and is able to hold meetings with the Slough Place Based Committee and through bringing these two important meetings together we will

- strengthen the place approach for all Slough health and care partners
- to enable us to jointly oversee the delivery of our shared integration priorities through our Health and Care Plan
- to create a stronger connection with the Health and Wellbeing Board deepening the connections between CCG, PCN and member colleagues in the local authority
- make best use of stakeholder's time
- to help strengthen the relationships between primary care and the local authority
- to avoid duplication of time and effort

2. Responsibility

The Health and Social Care Partnership Board will:

- a) Agree strategic direction for the integration of health and social care within Slough.
- b) Ensure commissioned services across the partnership are aligned to deliver efficient and effective services, designed to improve outcomes.
- c) Consider any issue of health and social care strategic policy, public health strategy or general community concern within Slough
- d) Deliver Priority Two – 'Integration' of the Slough Wellbeing Strategy 2020-2025 on behalf of the Slough Wellbeing Board.

3. Principles

- a. To align strategic direction, prioritise actions and present clear plans of what will be done locally to address needs and improve health wellbeing and reduce health inequalities, by:
 - Prioritising actions, based on the agreed strategic direction, joint commissioning strategies and joint strategic needs assessment, to meet the needs of the current population without compromising the wellbeing of future generations.
 - Communicating actions in publicly available action plans.
 - Reviewing and ensuring alignment for all new Integrated Care Systems developments.
- b. To monitor progress against the actions agreed in local plans and against nationally set outcomes and ensure action is taken where appropriate to improve outcomes, by:

- Evaluating performance against locally agreed priorities.
 - Evaluating performance against nationally set outcomes frameworks for the NHS, public health and social care.
 - Supplying information to the Wellbeing Board for their annual report, in order that the partnership is publicly accountable for delivery of these actions.
- c. To consult with service users and carers about service developments which affect them, by:
- Working with and involving people who use health and social care services, carers and communities in equal partnership.

4. Partnership Working

The Health and Social Care Partnership Board will coordinate partnership working to minimise duplication, and maximise the cost effectiveness of services, by:

- Working closely with related boards and committees, including the Slough Wellbeing Board and the Slough Place Based Committee.
- Reporting regularly to the Slough Wellbeing Board.
- Integrating the business action plans of partner organisations.
- Coordinating information sharing across partners
- Coordinating commissioning decisions to reflect the priorities identified by the partnership including the use of joint commissioning and pooled budgets where appropriate.

The Health and Care Partnership Board and the Place Based Committee will work collaboratively and conduct their meetings at the same time. The Health and Social Care Partnership Board retains its own delegation, Terms of Reference and membership, but is able to transact business with the Place Based Committee. The Slough Place Based Committee is able to conduct any confidential business related to its own statutory delegated responsibilities separately in a 'Part B' meeting. The Terms of Reference for the Slough Place Based Committee are set out in Appendix B.

A summary of the minutes from the meeting will be shared with both the Slough Health and Wellbeing Board and the Governing Body of the Frimley CCG to support oversight and transparency

5. Membership

- 5.1 Members will be required to represent their organisation with sufficient seniority and influence for decision making.
- 5.2 Membership of the partnership board will consist of the following core (voting) members:
- Alan Sinclair – Executive Director People (Adults) (Slough Borough Council) (co – chair)
 - Tracey Faraday Drake – Executive Managing Director Slough Place (Frimley CCG) (co-chair)
 - Danny Bailey – Interim Director of Strategy (Frimley Health NHS Foundation Trust)
 - Suzanne Foley – Association Director for Public Health (Slough Borough Council)
 - Chair of Health and Wellbeing Board (SBC)
 - Chair of People Scrutiny Committee (SBC)

- Dr Jim O'Donnell – Clinical Leader (Frimley CCG)
- Arthur Ferry – Lay Member for the Slough Place (Frimley CCG)
- Slough Finance Lead
- Debbie Fraser Deputy CFO (Frimley CCG)
- Ramesh Kukar – Chief Executive (Slough CVS)
- Susanna Yeoman – Deputy Regional Director (East Berkshire Healthcare Foundation Trust)

The following people will also be invited to attend the Partnership Board

- Marc Gadsby – Associate Director ASC Operations (Slough Borough Council)
- Jayne Reynolds - Regional Director Director (East Berkshire Healthcare Foundation Trust)
- Mike Wooldridge – Better Care Programme Manager (Frimley CCG)
- Nadia Barakat – Associate Director, Mental Health (East Berkshire Healthcare Foundation Trust)
- Sangeeta Saran – Director of Operations (Frimley CCG)
- Seb Byrne – Head of Mental Health Services (East Berkshire Healthcare Foundation Trust)
- Jane Senior – Associate Director People Strategy and Commissioning (Slough Borough Council)
- Representatives from the Adult Social Care Co-Production Network
- Representatives from Slough Healthwatch
- Dr Nitha Nanda – PCN Director Slough
- Dr Bharan Kumar - PCN Director Slough
- Dr Asif Ali - PCN Director Slough
- Dr Raj Bharagava - PCN Director Slough

5.3 Other members shall be appointed by the Co Chairs after consultation with the partnership.

5.4 Membership of the partnership will be reviewed annually.

6. Members' roles and responsibilities

All members of the partnership will commit to the following roles, responsibilities and expectations:

- Committed to attending meetings.
- Uphold and support partnership decisions and be prepared to follow through actions and decisions obtaining the necessary financial approval from their organisation for the partnerships proposals and declaring any conflict of interest.
- Be prepared to represent the partnership at stakeholder events and support the agreed consensus view of the partnership when speaking on behalf of the partnership to other parties.
- Champion the work of the partnership in their wider networks and in community engagement activities.
- Participate in partnership discussions to reflect views of their partner organisations, being sufficiently briefed to be able to make recommendations about future policy developments and service delivery.
- Ensure there are communication mechanisms in place within the partner organisations to enable information about the priorities and recommendations of the partnership to be effectively disseminated.

7. Resignations

Members may resign at any time by giving written notice to the Co Chairs.

8. Removal

The Co Chairs may remove a member by giving written notice in any of the circumstances set out below:

If the member:

- Has been absent from partnership meetings a period of more than three months.
- Is unfit to continue the appointment because of misconduct.
- Has failed to comply with the terms of the appointment.
- Is otherwise unable, unfit or unwilling to carry out the member's functions.

9. Co Chairs

The role of the Co Chairs is to provide leadership and direction to the partnership. The Co Chair's responsibilities include:

- To chair and facilitate partnership meetings.
- To plan the annual cycle of partnership meetings and set the agendas.
- To give directions to partnership policy making.
- To monitor decisions taken at partnership meetings are implemented.
- To enable the partnership to fulfil its responsibilities.
- To secure consensus between individual partner organisations.
- To represent the partnership at meetings with key organisations and promote its objectives effectively.
- To act as a spokesperson for the partnership where appropriate.
- To attend and be a member of other committees or working groups when appropriate in their role as Chair.
- To represent the partnership at Slough Wellbeing Board and at appropriate events, meetings or functions.

10. Chairing the meetings

10.1 The partnership shall be Co Chaired by Slough Borough Council's Executive Director for People (Adults) and the Executive Managing Director Slough Place.

10.2 The Chair of the partnership shall alternate at each meeting, with an equal number of meetings chaired by Slough Borough Council's Executive Director for People (Adults) and the Executive Managing Director Slough Place.

11. Meetings

11.1 The partnership shall schedule meetings at least 10 times a year with other meetings as necessary.

11.2 The dates of these meetings shall be agreed by the partnership at the first meeting of the new calendar year.

11.3 Members will be notified of the date, time and venue of each meeting by email immediately after the first Partnership meeting of the new calendar year. Meetings shall be held at such dates, times and venues, as the co chairs and the partnership itself shall determine.

11.4 The dates of meetings will only be changed in exceptional circumstances.

- 11.5 The agenda and supporting papers shall be forwarded to each member of the Partnership at least 5 working days before the date of the meeting
- 11.6 Any member may request that an item is included on the Partnership's Forward Plan. Such items shall be brought to the notice of the Co Chairs at first available meeting.
- 11.7 Any member with an interest in an item under discussion shall be expected to declare their interest at the start of the meeting.
- 11.8 The partnership shall also hold ad-hoc meetings, workshops and development sessions throughout the calendar year as and where appropriate

12. Special meetings

A special meeting of the Partnership may be called at any time by the co chairs or at the request, in writing of any five members. This meeting may be called with less than 5 working days' notice if the co chairs so directs, on the grounds that there are matters demanding urgent consideration.

13. Decisions

- 13.1 Decision making will be achieved through consensus reached amongst those members present. If a consensus is not reached, members would vote to reach to a decision
- 13.2 Decisions relating to the **Better Care Fund** would require the presence of the following members:
- Alan Sinclair – Executive Director People (Adults) (Slough Borough Council) (co – chair)
 - Tracey Faraday Drake – Executive Managing Director Slough Place (Frimley CCG) (co-chair)
 - SBC Finance Lead
 - Debbie Fraser Deputy CFO (Frimley CCG)

14. Quorum

- 14.1 Meetings will be deemed quorate if at least five core members of the partnership are present and must include one of the Co-Chairs. In no case shall the quorum for the partnership be less than five.
- 14.2 If the number of members increases or decreases this will need to be reviewed.
- 14.3 Where a meeting is inquorate those members in attendance may meet informally but any decisions taken shall require appropriate ratification at the next quorate meeting of the Partnership.
- 14.4 A meeting must remain quorate for its full duration. Should members arrive late or leave for any reason, quoracy must be maintained. If the meeting is or becomes inquorate, partnership decisions can no longer be made and any discussions shall be informal only. The relevant co chair may decide to call a special meeting to undertake the remaining business.

15. Sub-Groups

- 15.1 The partnership may establish sub groups or Task and Finish groups to help it undertake its strategic functions. The membership and terms of reference for these groups will be will

be determined by the Partnership.

16. Administration

- 16.1 The agenda for each meeting shall be agreed by the co chairs as part of the partnership's ongoing forward work plan for the calendar year.
- 16.2 Administrative support will be provided by the council, who will arrange the meetings of the partnership and publish its agendas. Agenda's will be despatched at least five working days in advance of the meeting. The council will also be responsible for the minutes of the meeting (including special meetings) and their subsequent circulation.
- 16.3 Attendance at meetings and access to the minutes will be restricted to members of the partnership. However, summaries of activity undertaken by the board will regularly be provided to the Slough Wellbeing Board.
- 16.4 Requests from non-members to view the minutes and/or attend the meetings as observers will be considered based on a case by case basis.

17. Dissolution

Members have the right to dissolve the partnership at any time deemed fit by members.

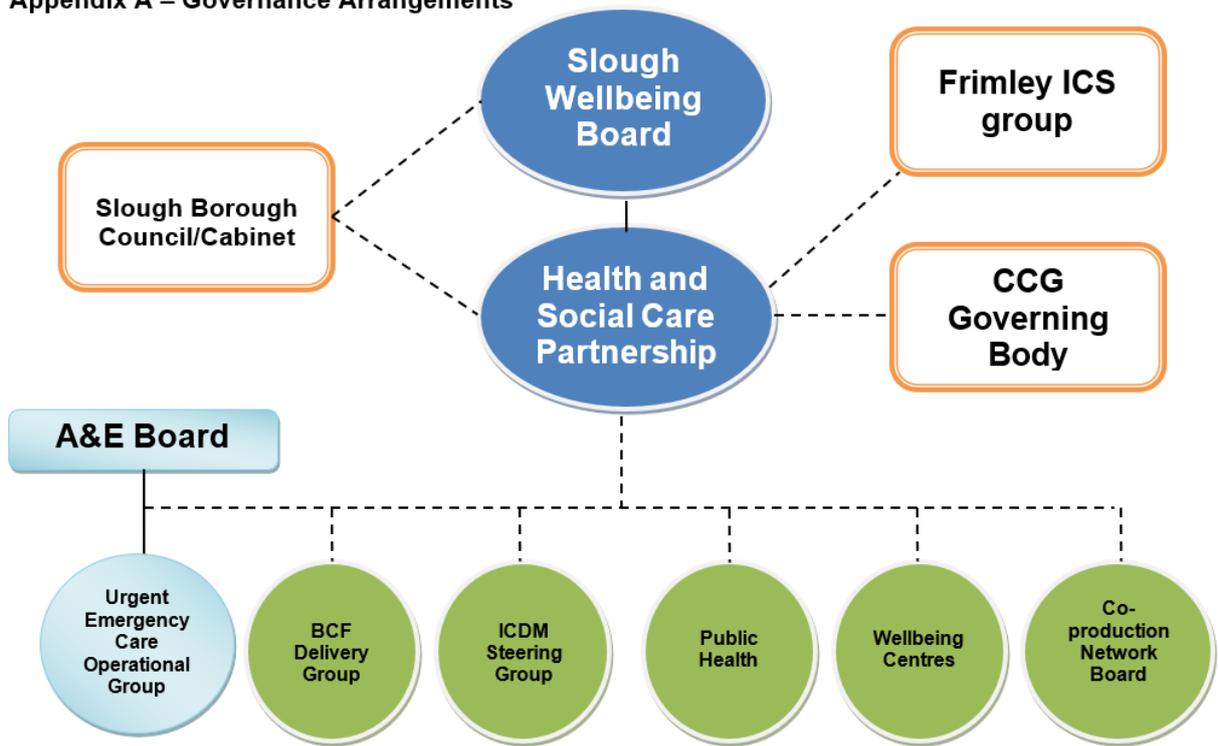
18. Governance

A diagram showing the Partnership relationship to the Slough Wellbeing Board and other boards and partnerships is attached at Appendix A.

19. Annual review of terms of reference

- 19.1 These terms of reference will be reviewed annually by the Partnership's Co Chairs.
- 19.2 Any revisions shall be endorsed by the Partnership

Appendix A – Governance Arrangements



Appendix B

Slough Place Based Committee TERMS OF REFERENCE

1. INTRODUCTION

The Place based Committee (the Committee) is authorised by NHS Frimley Clinical Commissioning Group (Frimley CCG) to ensure that in Slough effective arrangements are in place to work with staff, members and local partners improving the health of, and the quality of healthcare for, the local population, the delivery of the quality, operational and financial performance of the place, and the design of services in the place to meet the needs of individuals/patients.

The Committee is also able to hold meetings jointly with the Slough Health and Social Care Partnership Board to:

- strengthen the place approach for all Slough health and care partners
- to enable us to jointly oversee the delivery of our shared integration priorities through our Health and Care Plan
- to create a stronger connection with the Health and Wellbeing Board deepening the connections between CCG, PCN and member colleagues in the local authority
- make best use of stakeholder's time
- to help strengthen the relationships between primary care and the local authority
- to avoid duplication of time and effort

The Committee is established in accordance with the constitution of the Frimley CCG, standing orders and scheme of delegation. These terms of reference set out the membership, remit and responsibilities and reporting arrangements of the Committee.

2. DELEGATED AUTHORITY

The Committee acts under the delegated authority of the Frimley CCG.

3. PURPOSE

The purpose of the Committee is to:

- Reduce health inequalities, and improve health outcomes for the population of Slough
- Work with partners including Primary Care Networks, Community providers and Local Authority colleagues to enable integrated models of care to be developed providing leadership and direction where required
- Actively engage with the local population, community groups, and their representatives in ensuring that the voice of local people is heard and informs Place based decision-making
- Seek opportunities to jointly commission services with the Local Authority taking collective action to prevent ill health, reduce inequalities and create healthier communities.
- Shape and influence the design and development of the local Partnership strategies, including the Health and Wellbeing Strategy, the Frimley CCG and ICS strategy and priorities on behalf of the population of Slough
- Ensure the implementation of Place based and Frimley CCG /system plans and strategies in our Place
- Effectively manage local resources, and ensure best value when making commissioning decisions on behalf of local people

4. REMIT AND RESPONSIBILITIES

The main responsibilities of the Committee will be to:

- Develop an agreed and detailed understanding of the **needs of the local population**, and the priorities for health within this, ensuring system plans reflects local needs.
- Oversee the preparation and implementation of a **local delivery plan** to ensure delivery of system plans, tailored to meet local needs, that deliver operational, quality and financial performance standards for Slough
- Fulfil **the assurance function in relation to quality, operational and financial performance** for those areas for which it has responsibility
- **Understand performance, finance and quality**, taking proactive action to prevent deterioration, and taking action to restore performance, financial control and quality should it fall below acceptable levels for Slough and
- **Allocate resources** in line with the agreed budgetary plan as delegated by Frimley CCG.

Principal duties include:

Quality Improvement and Assurance

1. Provide **assurance** that the anticipated health outcomes are being delivered at Place, and escalate any specific issues to the Governing Body or Quality, Finance and Performance of Frimley as required
2. Oversee and be assured regarding **effective management of risk** to manage and **address clinical governance issues**

Finance, Contract Monitoring and Performance

1. To ensure that the financial allocation for Slough and the Frimley CCG is optimised and offers value for money (i.e., being used effectively, efficiently and economically)
2. Maintain an overview of all relevant Place based KPIs and quality standards.
3. Monitor the delivery of agreed **improvement programmes**.

5. PARTNERSHIP WORKING

The Committee will coordinate partnership working to minimise duplication, avoid cost shunting and maximise the cost effectiveness of services, by:

- Working closely with related boards and committees, including the Slough Health and Social Care Partnership Board and the Slough Health and Wellbeing Board.
- Integrating the business action plans of partner organisations.
- Coordinating information sharing across partners
- Coordinating commissioning decisions to reflect the priorities identified by the partnership including the use of joint commissioning and pooled budgets where appropriate.

The Committee will work collaboratively with the Slough Health and Social Care Partnership Board and conduct its meetings at the same time. The Committee will retain its own delegation, Terms of Reference and membership, but is able to transact business with the Slough Health and Social Care Partnership Board. The Committee will conduct any confidential business related to its own statutory delegated responsibilities separately in a 'Part B' meeting. The Terms of Reference for the Slough Health and Social Care Partnership are set out in Appendix 1.

A summary of the minutes from the meeting will be shared with both the Governing Body of the Frimley CCG and the Slough Health and Wellbeing Board and to support oversight and transparency.

6. MEMBERSHIP AND PROBITY

Voting Members:

Clinical Lead
Lay Member (Chair)
Managing Director
Primary Care Representation
Slough BC Representative
Nominated Finance Lead
Nominated Quality Lead
Nominated Operations lead
Public Health Representation

Non-voting members

Primary Care Network Clinical Directors (GP representatives)
PPG Lay Member x 1
Healthwatch

Other representatives may be invited by the Chair to attend the meetings on an ad hoc basis.

If the meeting is not quorate, the Chair will circulate the proposed decision or action and seek e-mail confirmation from the members who were not present at the meeting.

The Committee shall identify a person to act as secretary to the Committee, who will attend to take minutes of the meeting and provide appropriate support to the Chair and Committee members.

Conflicts of Interest

The Committee will make arrangements to manage conflicts and potential conflicts of interest to ensure that decisions made will be taken and seen to be taken, without any possibility of the influence of external or private interest.

All individuals attending a meeting, whether as a member or in attendance, must declare any potential conflicts of interest. It will be for the Chair of the meeting to decide how potential conflicts of interest are managed, including asking the individual to withdraw from the meeting in some cases where issues are discussed, or decisions taken.

7. FREQUENCY AND QUORACY

- Meetings shall be held at least 10 times per year with extraordinary meetings called by the Chair, if required.
- The Committee will be considered quorate when: There are 5 place-based voting members
- It is anticipated and expected that all decisions would be made by consensus, but should this not be possible in exceptional circumstances or such that a vote is required, all of the members of the Committee identified above shall be allowed to vote. This does not include supporting members. In the event of a tied vote, the Chair shall have a second and casting vote.

8. ACCOUNTABILITY AND DEPENDENCIES

- Each Place Committee is accountable to the Governing Body of the Frimley CCG
- The minutes of Committee meetings shall be formally recorded and submitted to the Governing Body of the Frimley CCG. The Chair of the Committee shall draw to the attention of the Governing Body any issues that require disclosure or require executive action.

9. MONITORING EFFECTIVENESS

- The Committee will review its own performance, membership and terms of reference annually.
- The Committee will submit a regular report to the Governing Body against its agreed work plan and making proposals for any changes.

This page is intentionally left blank

SLOUGH BOROUGH COUNCIL**REPORT TO:** People Scrutiny Panel **DATE:** 13th September 2021**CONTACT OFFICER:** Sally Kitson, Partnership Manager
(For all Enquiries) 07770736441**WARD(S):** All**PART I****FOR INFORMATION****ADULT SOCIAL CARE LOCAL ACCOUNT 2019-20****1. Purpose of Report**

To provide the People Scrutiny Panel with an opportunity to view the draft Adult Social Care Local Account for 2019-20. This is an annual report which provides an update on Adult Social Care activity.

This Local Account relates to the financial year pre-dating the one significantly impacted by Covid-19. However the considerable ongoing and additional demands placed on Adult Social Care during the following year led to this report being delayed. It is also the reason for it being presented in a much more concise format. Additionally, the reason for the further delay in it being brought to the attention of this panel was because of the priority focus being the Section 114 notice.

2. Recommendation(s)/Proposed Action

The Committee is requested to note the Local Account for information.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

The work of Adult Social Care Services in Slough strives to address some of the priority outcomes of the current Slough Wellbeing Strategy Priorities

1. Starting Well
2. *Integration (relating to Health & Social Care)*
3. *Strong, healthy and attractive neighbourhoods*
4. *Workplace health*

Adult Social Care Services in Slough are particularly focused on meeting Outcome Two of the five priority outcomes in the Council's Five Year Plan

- Our people will be healthier and manage their own care needs

4. **Other Implications**

- (a) **Financial** - There are no financial implications directly resulting from the recommendations of this report.
- (b) **Risk Management** - There are no identified risks associated with the proposed actions.
- (c) **Human Rights Act and Other Legal Implications** - There are no direct legal implications. There are no Human Rights Act Implications.
- (d) **Equalities Impact Assessment** - There is no requirement to complete an Equalities Impact Assessment (EIA) in relation to this report.

5. **Supporting Information**

The Local Account provides a summary of the activity and work that has taken place in Slough's Adult Social Care services. It covers the time period of April 2019-March 2020.

The Local Account is an important aspect of our commitment to transparency within Adult Social Care as well as our commitment to improving quality. It includes the Council's spend on Adult Social Care services, summarises key achievements, ongoing challenges and future priorities to help ensure positive outcomes for residents who are dependent on health and social care services..

6. **Conclusion**

Slough has produced a draft Local Account of Adult Social Care for 2019-20. It is provided for the information of the People Scrutiny Panel.

7. **Appendices Attached**

Appendix 'A' - Slough Adult Social Local Account 2019-20.

Slough Adult Social Care

Local Account 2019/20



Introduction and welcome

Every year Slough Borough Council produces an annual report which summarises how Adult Social Care is helping to support and improve the lives of the most vulnerable people in our town. It outlines key facts and information including a summary profile of our population, the number of people accessing Adult Social Care services, the type of services they receive and how resources are allocated. The report also comments upon our performance and the areas where we continue to strive to improve further.

Although this report relates to the period April 2019 to March 2020, it would be impossible not to comment on the huge impact that Covid-19 has had upon the Adult Social Care workforce and our partners, as this has dominated our focus since the beginning of 2020. The residents of Slough and those working in it have and continue to be deeply affected by this pandemic. Together we have tirelessly continued to ensure that in line with both our Five Year Plan and Adult Social Care strategy, residents are supported to live as safely and independently as possible during these unprecedented times.

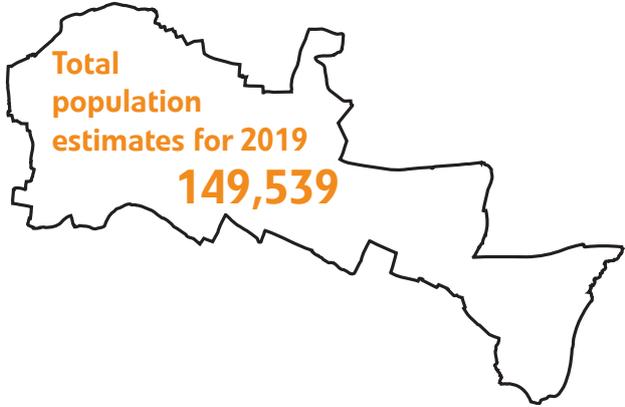
The impact of Covid-19 and the ongoing additional demands placed on Adult Social Care has led to this annual report being delayed this year, and it is also presented in a much more concise format. Nonetheless we do hope you find it useful in giving you a snap shot of Adult Social Care activity.

I am immensely proud of the dedication shown by those working within all areas of the council, our provider services, health, and other partners including community groups and local residents, pulling together tirelessly to respond to the crisis. As one of the local authorities with very high rates of Covid-19 infection and outbreaks, our coordinated 'One Slough' response has and continues to protect many of our most isolated and vulnerable residents, many of whom are known to Adult Social Care services. Sadly as a town we have had to deal with huge loss and much trauma. However I am confident that through the strength and commitment to our partnership working we will continue to pull together to respond to the pandemic, including ensuring strong and clear public health messages are targeted to all including our black and minority ethnic communities.

Alan Sinclair
Executive Director People (Adults)



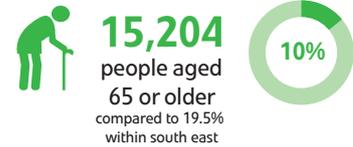
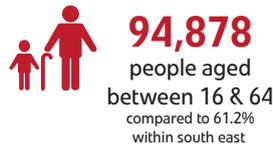
Summary of Slough: our people



Male Population
75,632



Female Population
73,907

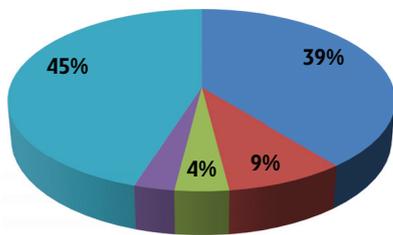


	Healthy life expectancy at birth for males 58.7 years compared to 65.6 years in south east and 63.4 years in England	Male life expectancy at birth 78 years compared to 80.5 years in south east and 79.5 years in England
	Healthy life expectancy at birth for female 60 years compared to 66.9 years in south east and 63.9 in England	Female life expectancy at birth 82 years compared to 84 years in south east and 83.2 years in England

Source: ONS population mid term estimates

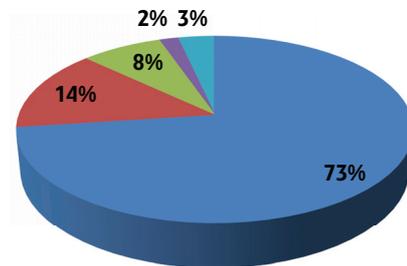
Ethnic profile

Ethnic group



- Asian/Asian British
- Black/African/Caribbean/Black British
- Mixed/multiple ethnic groups
- Other ethnic group
- White

Languages spoken



- English
- South Asian
- Other European (EU)
- African
- Other

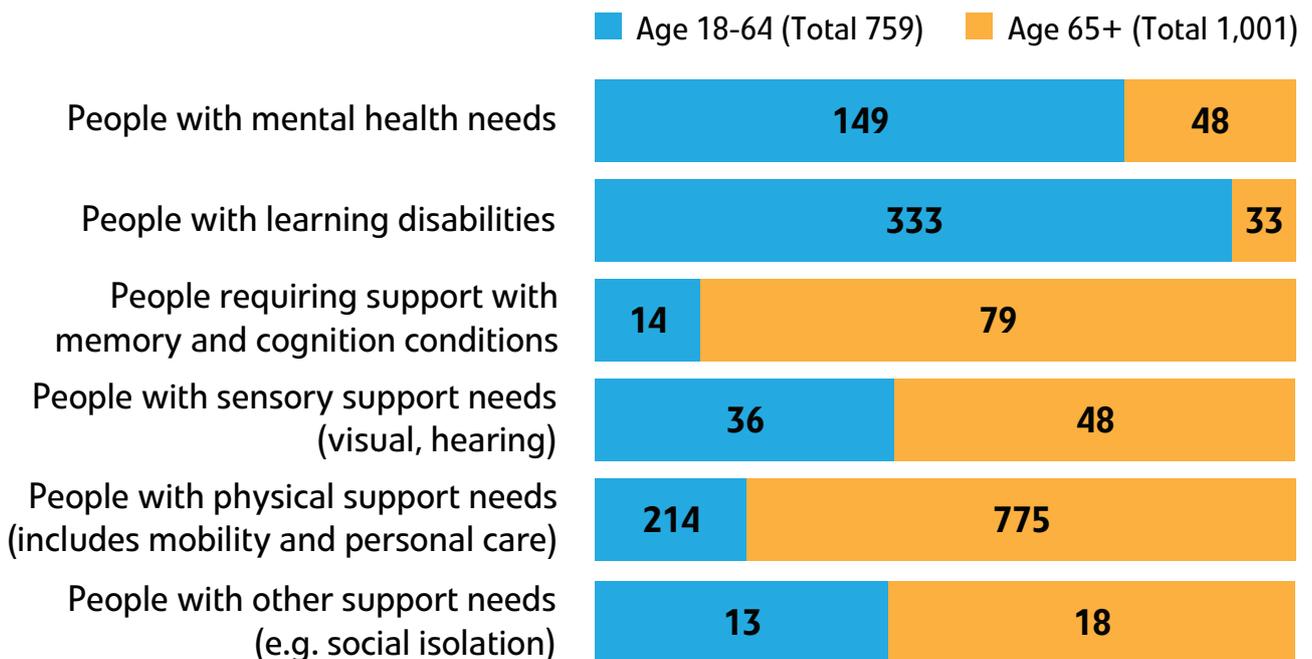
Source: Berkshire Observatory (ONS population census 2011)

Summary numbers of people receiving support from Adult Social Care



Source: Statutory returns for 2019-20

People receiving long term support



How we spend money

For 2019/20 the council spent £36.9m on social care for adults (aged 18 +). This includes:

	£10m	Care Homes
	£5.5m	Supported Living
	£4.8m	Care at Home
	£6.4m	Direct Payments
	£2.2m	Directly provided services (day services)
	£1.4m	Voluntary sector and prevention services
	£1.1m	Reablement (short term support to help recovery)
	£5.1m	Staff (Social care staff)
	£0.4m	Equipment including telecare and assistive aids

How Slough is performing

The Adult Social Care Outcomes Framework (ASCOF) measures how well care and support services achieve the outcomes that matter most to people. This is used to set priorities for care and support, measure progress and strengthen transparency and accountability.

25% of those receiving Adult Social Care services that were sent the survey responded. This is a reduction from the previous year which was 31%.

Areas where we have seen improvement

- More people that use services feel they have control over their daily life
- More people that use services receiving self-directed support
- Improved outcomes of short-term services requiring no further support or lower level support
- A reduced number of over 65s admitted to residential and nursing care homes
- More timely hospital discharges
- More carers receiving self-directed support

Areas for continued improvement

- Adults with a learning disability in paid employment
- Making information easier to find for people who use services
- Over 65s living at home three months after discharge from hospital into short term support services
- More people who use services need to report:
 - feeling safe
 - services used have made them feel safe and secure
 - having good quality of life
 - satisfied with their care and support

Our future priorities



This document can be made available on audio tape, braille or in large print, and is also available on the website where it can easily be viewed in large print.

Slough Adult Social Care Local Account 2019/20

If you would like assistance with the translation of the information in this document, please ask an English speaking person to request this by calling 01753 475111.

यदि आप इस दस्तावेज़ में दी गई जानकारी के अनुवाद कए जाने की सहायता चाहते हैं तो कृपया किसी अंग्रेजी भाषी व्यक्ति से यह अनुरोध करने के लिए 01753 475111 पर बात करके कहें.

ਜੇ ਤੁਸੀਂ ਇਸ ਦਸਤਾਵੇਜ਼ ਵਿਚਲੀ ਜਾਣਕਾਰੀ ਦਾ ਅਨੁਵਾਦ ਕਰਨ ਲਈ ਸਹਾਇਤਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਸੇ ਅੰਗਰੇਜ਼ੀ ਬੋਲਣ ਵਾਲੇ ਵਿਅਕਤੀ ਨੂੰ 01753 475111 ਉੱਤੇ ਕਾਲ ਕਰਕੇ ਇਸ ਬਾਰੇ ਬੇਨਤੀ ਕਰਨ ਲਈ ਕਹੋ।

Aby uzyskać pomoc odnośnie tłumaczenia instrukcji zawartych w niniejszym dokumencie, należy zwrócić się do osoby mówiącej po angielsku, aby zadzwoniła w tej sprawie pod numer 01753 475111.

Haddii aad doonayso caawinaad ah in lagu turjibaano warbixinta dukumeentigaan ku qoran, fadlan weydiiso in qof ku hadla Inriis uu ku Waco 01753 475111 si uu kugu codsado.

اگر آپ کو اس دستاویز میں دی گئی معلومات کے ترجمے کے سلسلے میں مدد چاہئے تو، براہ کرم ایک انگریزی بولنے والے شخص سے 01753 475111 پر کال کر کے اس کی درخواست کرنے کے لئے کہیں۔

SLOUGH BOROUGH COUNCIL

REPORT TO: People Scrutiny Panel

DATE: 13th September 2021

CONTACT OFFICER: Nick Pontone
Democratic Services Lead
(For all Enquiries) (01753) 875120

WARDS: All

PART I
FOR COMMENT AND CONSIDERATION

PEOPLE SCRUTINY PANEL - WORK PROGRAMME 2021/22**1. Purpose of Report**

For the People Scrutiny Panel to discuss its work programme for 2021-22.

2. Recommendations/Proposed Action

That the Panel review the work programme and potential items listed for inclusion.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

3.1 The People Scrutiny Panel, along with the Overview & Scrutiny Committee and other Scrutiny Panels combine to meet the local authority's statutory requirement to provide public transparency and accountability, ensuring the best outcomes for the residents of Slough.

3.2 The effective scrutiny of the council's decision making and work in the area of health and social care underpins the delivery of all four of the Joint Slough Wellbeing Strategy priorities:

- Starting Well
- Integration
- Strong, healthy and attractive neighbourhoods
- Workplace Health

3.3 The work of the Health Scrutiny Panel also reflects the following priorities of the Five Year Plan:

- Outcome 1: Slough children will grow up to be happy, healthy and successful.
- Outcome 2: Our people will be healthier and manage their own care needs.

4. **Other Implications**

(a) Financial

There are no financial implications of proposed action.

(b) Risk Management

There are no risk management implications of proposed action.

(c) Human Rights Act and other Legal Implications

There are no Human Rights Act implications arising from this report.

(d) Equalities Impact Assessment

There are no Equalities implications arising from this report.

5. **Supporting Information**

5.1 This work programme should cover all aspects of the People Scrutiny Panel's remit, including both Adult and Children's Services.

5.2 The work programme is a flexible document which will be continually reviewed throughout the municipal year. It will be updated to take into account requests for consideration of issues from members of the People Scrutiny Panel.

6. **Conclusion**

This report is intended to provide the People Scrutiny Panel with the opportunity to review its upcoming work programme and make any amendments it feels are required.

7. **Appendices Attached**

A - Work Programme for 2021/22 Municipal Year

8. **Background Papers**

None.

PEOPLE SCRUTINY PANEL
WORK PROGRAMME 2021/2022

Meeting Date
13 September 2021
<ul style="list-style-type: none"> • Provider Services Review • Petition • Health and Care Plan • Adult Social Care Local Account
11 November 2021
<ul style="list-style-type: none"> • Budget Proposals relating to People (Adults) and People (Children) directorates
2 December 2021
<ul style="list-style-type: none"> •
31 January 2022
<ul style="list-style-type: none"> •
31 March 2022
<ul style="list-style-type: none"> •

Items to be scheduled

- Safeguarding Annual Report
- Scrutiny of external health bodies and organisation
- Slough Children First Progress Report

This page is intentionally left blank